## DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	RESEALABL	E FLEXIBLE PACKAGING			<u></u>
in the second			<del> </del>		
the application of which  is attached hereto	OR	X was filed on _18.10.2002 . United States Application N Number PCT/FR2002/0035 (Confirmation No	82),	and was amen	
			(if appli	cable).	
I hereby state that I have reviewed and by any amendment specifically referred	understand the corto above.	ntents of the above identified a	pplication, inc	luding the clai	ms, as amended
I acknowledge the duty to disclose continuation-in-part application(s), mat the national or PCT international filing	erial information v	vhich became available betwee	as defined in the filing da	n 37 CFR 1.56 tte of the prior	including for application and
I hereby claim foreign priority under 3d breeder's rights certificate(s), or 365(a) United States of America, listed below inventor's or plant breeder's rights ce application on which priority is claimed	of any PCT interry and have also identificate(s), or any	national application(s) which do entified below, by checking the	esignated at le e box, any fo	east one countr reign application	y other than the on(s) for patent
				Priority (	
Prior Application Number(s)	Countr	y Filing Dat	e	Yes	No
	<del>, i</del>				
I hereby claim benefit under 35 United		e) of any United States provision		i(s) listed belov	w.
Аррі	Application Number(s)		Filing Date		
I hereby claim benefit under 35 Unite application(s) designating the United S not disclosed in a listed prior United St United States Code, §112, I acknowled defined in 37 C.F.R. 1.56 which occurred the of this application:	tates, listed below ates or PCT Internated age my duty to di	and, insofar as the subject matt ational application in the manne isclose any information materi	er of each of er provided by al to the pate	the claims of the the first parage intability of thi	ns application in raph of Title 35 is application a
Prior U.S. or International Application N	iumber(s)	U.S. or International Filing Date		Stat	tus
I hereby appoint all attorneys of SUGI my attorneys to prosecute this applicate therewith, recognizing that the specific discretion of Sughrue Mion, PLLC, and the same USPTO Customer Number.	tion and to transac attornevs listed u	t all business in the United Stander that Customer Number m	ates Patent an ay be change	d Trademark C	time at the sol

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:								
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Inventor's Signature 7:2017	Date 25/04/05							
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NAME OF SECOND INVENTOR:								
Given Name (first and middle [if any]) Family Name or Surname								
Inventor's Signature	r		Date					
Residence: City	State	Country		Citizenship				
Mailing Address:								
City	State	Zip		Country				
NAME OF THIRD INVENTOR:								
Given Name								
(first and middle [if any])		Family Name or Surnam	ie					
Inventor's Signature	<b>1</b>		Date					
Residence: City	State	Country		Citizenship				
Mailing Address:								
City	State	Zip		Country				
NAME OF FOURTH INVENTOR:								
Given Name (first and middle [if any])	Family Name or Surname							
Inventor's Signature			Date					
Residence: City	State	Country		Citizenship				
Mailing Address:								
City	State	Zip		Country				
NAME OF FIFTH INVENTOR:	1. 5 2/25							
Given Name								
(first and middle [if any])		Family Name or Surname						
Inventor's Signature	T	I	Date					
Residence: City	State	Country		Citizenship				
Mailing Address:		<del></del>		T				
City	State	Zip		Country				